



Corpsman makes patients life a little easier

Story and Photos By JO3 Justin Takasawa

If it can be done faster and better, the Navy wants to know about it. Just like in the business world, time is money. And customer satisfaction is number one for Naval Medical Center Portsmouth's Refractive Surgery Clinic.

Keeping this in my mind, HM3 Steve Ramlogan has developed a faster and more accurate system for checking in and tracking patients, diluting the long-standing slogan 'hurry up and wait.'

"A patient will come into the front of the office and see two computer screens that ask a bunch of demographic information and questions," said Ramlogan. "They answer the questions and automatically it spits out that information on all the forms we use for the next six months," he said.

Those questions include everything a nurse would have to ask a patient before seeing a doctor, so the wait process is reduced dramatically.

"What we had before," Ramlogan said, "were multiple sheets of paper that we used to do this on. Now we use just one form that is color coded."

And that patient information is less likely to be inaccurate because instead of a person to person exchange, it's a person to computer input.

"I think it's more accurate and better than filling out a piece of paper," said AD3 Robert McDonald of VF 103. McDonald had surgery in September and was able to enter his own demographics into the computer.

Ramlogan created the system about a year ago using Microsoft Access. Since then, any staff member can use it.

And the program is very user-friendly, said Ramlogan.

"There's no huge spreadsheet to use anymore. We have these computer forms for post-op information and anyone can enter the information."

That's good news for whomever steps in after Ramlogan moves on to his next duty station.



HM3 Steve Ramlogan shows his patient information program, a program which saves patients valuable time during the check-in process.

"Another bonus of having this database is patient tracking," he said. Currently, Ramlogan and the other staff can track around 1300 patients.

"And if we have any problem patients, we can pull up their files and track their progress. We can also look at the master database and analyze the data to see trends in these patients."

The clinic uses the database for statistical use as well.

But Ramlogan isn't satisfied. He has plans on taking the program to the next level, the Internet.

"What we plan on doing is having a website where patients can enter their demographics before they even come into the office," Ramlogan said. "They can enter all of it in a secure mode even before they step foot in the office, saving time for the receptionists and other patients."

McDonald feels the Internet is a good place for a patient's introduction to the system.

"If we could do it at home instead coming all the way here, it would save a lot of

time," McDonald said.

And time and customer service are what Naval Medical Center Portsmouth focuses on when developing new changes such as Ramlogan's system. In keeping with the hospital's tradition, he put his knowledge to good use and made life a little easier for more than 1300 people.

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How do I get something in The Courier?

The command's monthly publication provides an avenue to circulate all the useful information the Medical Center staff has to offer. Contact the Public Affairs Office at 953-7986, Fax 953-5118, via Guardmail, or you can E-mail the PAO, Lt. Lyon, at rtlyon@pnh10.med.navy.mil. Submissions should be on a disk in text or Word format with a paper copy attached. Photos are welcome and can be returned on request. The Courier now comes out once a month. Send your submissions to the Public Affairs Office and we'll put it in the next current issue, space permitting. Submission deadline for the next issue is the 15th!!

We are located in Bldg. 215, second deck, Room 2-118 (next to the Conference Room.)

NMCP Honors Sailors of the Quarter

Story and Photos By JO3 Theresa Raymond

Naval Medical Center Portsmouth honored three of its finest sailors during the fourth quarter Sailor of the Quarter luncheon, Thursday, Dec. 13, 2001.

HM1 Ruben Balmaceda was named Sailor of the Quarter, HM3 James Herbst, who was frocked to Second Class Petty Officer later that day, won Junior Sailor of the Quarter, and the distinction of Bluejacket of the Quarter went to HN Jonathon Toney.

NMCP's Deputy Commander, Capt. Matthew Nathan presented the letters of commendation to all nominees as well as the awards to each winner.

During the opening remarks, Nathan reminded the nominees how much this accomplishment should mean to them and how much of an influence they'll have on their junior co-workers. "You (the nominated) will be center of attention. Your

hard work and efforts have paid off, as well as set the way for those in your footsteps."

NMCP's newest Bluejacket of the Quarter is very proud. "I didn't know anyone on the board, so naturally I wasn't sure how the outcome would be," recalls Toney.

Balmaceda compared the JSOQ board he faced in 1997 to the SOQ board he had to face this time, noting that the SOQ board setup was completely different. "Instead of one person having a topic and asking (the candidate) those questions, everyone has questions on every subject. So instead of just facing one person, (the candidate) gets questions from everyone, and it seems like all (the questions) are coming at once."

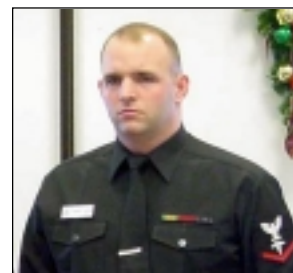
Each winner received a \$50 savings bond from the Chief Petty Officer's Association, \$25 gift certificates from the First Class Petty Officer's Association, a dinner for two at Otto's Restaurant from Geico, and more gifts from a host of Sailor of the Quarter sponsors.



HM1 Ruben Balmaceda



HN Jonathon Toney



HM3 James Herbst

January 2002 - National Volunteer Blood Donor Month

Since 1970, January has been declared National Volunteer Blood Donor Month (NVBDM). To help ensure an adequate blood supply, the Naval Medical Center Portsmouth Blood Donor Center has joined with American Association of Blood Banks to stress the importance of donating blood and to encourage new dedicated donors in the year 2002.

The need for blood is constant, and volunteer blood donors contribute nearly all the blood used for patient care in the United States. If all that are eligible to donate would do so on a regular basis (five to six times per year), blood needs could be met and shortages could become a thing of the past.

Everyone depends on blood more than is realized. Every three seconds, someone needs blood. Each day, patients across the country receive approximately 34,000 units of this vital resource. There is no substitute for blood. This year alone, as many as four million patients will require blood transfusions, as accident victims, people undergoing surgery, and patients receiving treatment for leukemia, cancer and other diseases, all utilize blood.

People who are interested in becoming blood donors or partners in the plateletapheresis program, should call Naval Medical Center Portsmouth Blood Donor Center at (757) 953-1686 for more information. Make an appointment today to...

Give Blood...The Gift of Life.

NMCP Mourns Departed Retiree, Staff Member, Friend

By JO2 Duke Richardson

Naval Medical Center Portsmouth recently lost one of its most precious assets. One of its people.

Donald Eugene Thomas, 55, passed away in his sleep December 9, 2001. Born in Iowa and raised in Missouri, he retired as a master chief petty officer from the U.S. Navy after 28 years of service. As a discharge planner at NMCP's Oncology Ward, he touched the lives of all he met and helped, says Cmdr. Barbara

Clarey, team leader, NMCP Oncology. "He knew the patients inside and out, he really cared that much about them," she said. "Whatever the patients needed or wanted, he always had things under control."

Lt. Julia King, a charge nurse with the oncology ward echoes the same sentiment about Thomas. She said there were many times he would go way beyond what was expected of him when it came to ensuring patients got the care and help they needed. "There were times when Mr. Thomas helped (some patients) that couldn't afford the cost of TRICARE coverage and he helped them out by paying the costs right out of his own pocket," she said. "This wasn't a one or two-time thing, there were a number of times he did this because he genuinely cared about the people. Another time he helped (a person barely getting by on a fixed income) during the holiday season by buying (the person) a Christmas tree because he was so moved by the situation. Some people have described him as being persistent when it came to meeting the needs of our patients, but he always got his point across when it came to finding better ways to benefit the patients. He was definitely a very special person that's going to be

missed."

"We really miss him a lot," said Clarey. "I would say he was larger than life in many ways, but especially when it came to patient care. Thanks to him we have more mental health



DONALD EUGENE THOMAS

support here. He helped identify the need in families of active duty cancer patients who had young children that may have mental health or other special needs just to help them with grief. When we got to a point where we knew a patient was going to die, he made sure that all

red tape was taken care of so the family would receive full benefits. He had that special connection with people that helped made it possible to get things done."

Concern for patients is just one of many things Thomas will be remembered for, says Clarey. Whether it's for the quality care he gave patients, or sharing his love of fishing to his co-workers, he will be remembered. "We will always remember the compassion and persistence he showed in taking care of people," she said. "He had a deep personal commitment to our patients and he showed it by the concern he had for them. That is something that won't be forgotten."

Donald leaves to cherish his memory his wife, Theresa Kay Thomas; five daughters, Theresa Honeycutt and her husband Brant of Portsmouth, Paula Thomas and Pam Thomas, both of Maryland, Patricia Leyland and her husband Ricky of Alaska, and Paula Endicott of Pennsylvania; a son, James Dryden of Carrollton; five grandchildren; a sister, Patricia Anderson of Missouri; two brothers, Dennis Thomas of Missouri and David Thomas of Texas

PEB BRIEFING

This is a reminder about the Physical Evaluation Board (PEB) Brief scheduled for **Tuesday, Feb. 12, 2002**. Our goal is maximum participation and attendance by the medical staff. There will be a question and answer period with the speakers.

Please forward all questions concerning the PEB process and LIMDU process to LT Taylor and he will forward them to the speakers. Now is the time to adjust schedules for attendance.

The Physical Evaluation Board (PEB) will be visiting the command Tuesday, 12 February 2002 to conduct their annual Disability Evaluation System (DES) briefing in the NMCP Auditorium, Side B from 1300-1600. This briefing will address specific disability related topics and Limited Duty processing issues. Speakers will include a presentation from Capt. Wurzbacher, Medical Advisor, President of Physical Evaluation Board; Cdr. Palumbo, OIC, PEB Liaison Officer and Lt. Wilsey, BUPERS.

The goal is to improve efficiency and accuracy of Medical Evaluation Boards (MEB) packages submitted to PEB and to expedite case processing for service members with medical impairments. This is an excellent training opportunity to ask questions regarding medical boards and Limited Duty processing. Additional information will be sent out in the near future concerning this training opportunity. The command point of contact for questions about the briefing is LT George Taylor, Team Leader, Medical Boards Branch, Customer Service Center at 953-7754/7764.

NMCP HOTLINE # 953-5800

We have established an NMCP Fraud, Waste, and Abuse Hotline (953-5800). This line can be used to help investigate and solve problems quickly at the local level. The Front Office is very concerned that we have an open door policy that all members of the Command feel empowered to point out potential problems, issues, or errors. The NMCP program is managed by the Command Evaluation Office, reporting directly to the Deputy Commander/Commander. This number will be manned 24 hours by staff or voice mail. Anonymous allegations will be reviewed and investigated but obviously, feedback cannot be provided. Feedback can only be provided if you leave your name and number. Either way, allegations will be researched and reports submitted to the Commander via the Deputy Commander.

Navy Medicine Office of Homeland Security Established

By BUMED Public Affairs

WASHINGTON, DC - Navy Surgeon General Vice Admiral Michael L. Cowan, MC, announced Wednesday that he has established the Navy Medicine Office of Homeland Security (NavMed OHLS) to serve as the focal point for homeland security efforts throughout Navy Medicine.

Cowan established the office in response to the terrorist attacks of September 11. The NavMed OHLS's mission is to develop and execute strategies to prepare for, prevent, protect against, respond to, and recover from threats or attacks that involve the Navy Medical Department. It will have a full-time staff at the Bureau of Medicine and Surgery and will also draw on expertise from active duty,

Reservists and civilians throughout Navy Medicine. NavMed OHLS activities will be aligned with other organizations involved with homeland security, including the White House Office of Homeland Security, the Department of Defense, Chief of Naval Operations and federal agencies that are DOD's partners in the Federal Response Plan, which outlines actions to be taken in the event of a Presidentially-declared disaster or terrorist attack. It will work closely with the other services to use their assets optimally.

Rear Admiral Alberto Diaz, MC, will head the NavMed OHLS. He will also

continue in his position as assistant chief for education, training and personnel at the Bureau of Medicine and Surgery.

"One of the first steps the office is taking is to get the right training to our front line healthcare providers," said Cmdr. Mary Chaffee, NC, the deputy for the office. Twelve hours of chemical and biological medical training will be required of most primary care providers and other

clinicians. Chaffee said that NavMed OHLS will take a global view of Navy Medicine to identify its strengths in facing disasters and terrorist threats, and then look at its vulnerabilities. "We will identify our vulnerabilities and minimize them to enhance our preparedness. Our efforts will also be focused on effective response to any type of threat. Navy Medicine must be able to perform its mission of force health protection under any circumstances," she said.

Third Party Collections -- it's the law

The Third Party Collections Program (TPCP) requires the government to bill for health care services received at military hospitals and clinics for patients who have health insurance. Many of our beneficiaries have health insurance plans through employment.

The Third Party Collections Program is congressionally mandated. Participation is not optional; it's the law. Public Law 101-510 (10 U. S. Code 1095) requires each non-active duty patient to be asked if they have health insurance coverage at each visit to this facility. This includes all visits: pharmacy, laboratory, radiology, and clinic.

The funds received from the Third Party Collections Program stay within this hospital and are used to buy medical equipment, supplies, furniture, renovations and continuing medical education of staff. Last fiscal year, this facility collected over 5.5 million dollars in insurance payments from the information you provided to us to bill for the healthcare.

There is so much more that could be collected. Please ask each patient if they have health insurance, and give them a health insurance questionnaire to complete. Send the questionnaires to the Third Party Collections Department, Bldg. 250. The Third Party Collections Department staff are available to provide training to your front desk personnel in collecting this vital information or to assist you with any questions you have about the Third Party Collections Program.

Rolling Thunder brings Santa, and Christmas cheer



Photos by Lt. Robert Lyon

Rolling Thunder motorcycle association visited NMCP December 16th. Santa toured the children's wards and visited with children and parents. This is an annual event for the association which donates toys and provides a little extra cheer to children who are in the hospital during the Christmas season.

NMCP honors Navy advancement tradition

Story and Photos by JO2 Duke Richardson

Seventy-eight Naval Medical Center Portsmouth Sailors received a special holiday gift this year. The gift of advancement. Through hard work and support from their peers and family, the new advancees saw their efforts pay off when they tacked on an additional chevron, or for some, their first.

Hundreds of friends, family members and well-wishers assembled in the auditorium to behold the selectees take the next step up the ladder.

HMCM (SW/FMF) David Carroll, NMCP's Command Master Chief, said the actual act of frocking someone is unique in itself. "This is an important part of a Sailors career and it is something that the other services do not have. This is truly a Navy tradition geared at praising our people for the hard work they do," he said. "Even though they will not be getting paid for it yet, the newly advanced petty officers here today must assume the greater responsibilities they will have at the next pay grade they achieved. The 78 Sailors getting frocked here today have shown they are ready for additional responsibilities, and we are here today to grant it to them."

Through all of the hard work and studying, one of the Navy's newest petty



New E-6 Frockees recieved their frocking certificates in a ceremony Dec. 13th

officers says it is time to look ahead at further opportunities for self-betterment. According to HM3 Keisha Acree, it took her a while to make it to the E-4 pay grade, but she is glad to finally advance. "It definitely feels good to finally become a third class petty officer," she said. "I know it's going to be tougher to get advanced to second class next time around with the changes to the advancement exams, so next time around, I'm going to study even harder so I won't have any problems trying to make second

class."

Now that the selectees from the last exam cycle have been frocked and now await their pay increases, it is now time to look forward to the March exam cycle which is just over three months away. So if you are eligible, it would be wise to prepare and start studying now. If you do, then by the time late spring comes around, your left arm may be a tad bit heavier from tacking on another chevron.

NMCP, NSHS Celebrate Native American Heritage Month

By JO3 Jodi Durie

The rich culture and heritage of Native Americans was recently recognized and celebrated at Naval Medical Center Portsmouth, in celebration of Native American Indian Heritage Month.

The festivities, which were organized through the joint efforts of NMCP's Command Heritage Committee and the Naval School of Health Sciences, took place in NMCP's gym. The program provided an opportunity for people of all cultures to experience the unique traditions of Native Americans.

"Today we are here to not only honor our heritage, but to live our heritage," said Capt. Charles B. Mount, Commanding Officer of NSHS. "Live your culture because it is who you are," he added.

Members of the Tidewater Native American Support Group provided authenticity to the program while educating and entertaining the audience through their guest speakers and dancers. Throughout the year, The Tidewater Native American support group puts on programs for schools, colleges, universities, and military commands.

The support group stresses the importance of education all year round, but additional emphasis is put on education during the month of November.

"Native American Heritage Month is a teaching month. It gives us a chance to promote our culture. We also help those of Indian heritage who don't know much about their background," said Larry Graylocks Cears, president of the support group. The group teaches native languages, the meanings of each

tribe's regalia and the Native American way of life.

The group also sponsors and attends Pow-Wows, but the group's main concern is youth for although they are only 25 percent of the Native American population at this time, they are 100 percent of the future.

"There are many myths people have about American Indians, so we are out trying to educate people," said Anderson. We are your next-door neighbors; we're the nurses, doctors, trash collectors and lawyers in your community. We're everyday citizens, but when it comes to our heritage we're Native Americans and we're proud of it," he said. "We're not going to give it up and we're going to continue to teach our children," added Anderson.

Departments Team Up to Combat DUI

By Lt. Cmdr. Fawn Snow

For the second year in a row, the Health Promotion Department, DAPA, and Injury Prevention Division of the Emergency Medicine Department joined forces to combat driving under the influence. In the year 2000 in Virginia, 355 persons were killed in alcohol-related crashes, approximately one death per day. Alcohol-related crashes resulted in an additional 8,251 persons being injured, more than 150 every week. Persons are legally considered driving or operating under the influence if their blood alcohol content (BAC) is 0.08 percent or higher, although persons can be considered under the influence with a lower BAC if their ability to operate a motor vehicle or watercraft is impaired.

This year's campaign, "None for the Road this Holiday Season," provided information on a variety of issues, including driving impaired and sleep deprived, alcohol-related laws, and current crash statistics, to over 200 persons. With the help of NMCP galley, the three departments gave out 160 non-alcoholic Citrus Collins drinks, encouraging hosts to offer their guests fun, tasty beverages in addition to water and sodas. To demonstrate the visual impairment caused by intoxication, visitors donned "drunk goggles" and surprised themselves by being unable to walk a straight line. "Drunk goggles" distort vision and perception in the same manner as alcohol.

For further questions about this or related topics, contact either Lt. Cmdr. Fawn Snow in the Emergency Medicine Department at 953-1402, HMC Marsha Burmeister in DAPA at 953-6076, or Alice Fitzpatrick in Health Promotions at 314-6014.

Texas Sunrise
8 ounces chilled orange juice
3/4 ounce grenadine syrup
Cracked or shaved ice (optional)
To orange juice in glass, add the grenadine.
Let it settle on the bottom or stir, as desired.
Add ice (optional) if desired.



Photo By Lt. Robert Lyon
Chief Gainous attempts to walk a straight line wearing "drunk goggles" that simulate the effects of alcohol.

DAPA News

By HMC Marsha Burmeister

Not only can alcohol and drugs play a role in being involved in an accident so can drowsiness. During the Holidays, we tend to travel long distances to see loved ones. Many times we start a trip on an adrenaline high, a false sense of being alert. To help ensure you arrive safely, be prepared.

To help prepare for a trip, make sure you do the following things:

1. Get plenty of sleep the night prior to your trip. Plan to drive when you're normally awake. Stay over-night instead of driving straight through.
2. Take breaks. Avoid driving during your body's down time.
3. Talk with passengers. Passengers should stay alert and let you know when you're showing signs of drowsiness. If you are sleepy, allow someone else to drive or pull over and rest.
4. Front passengers should stay alert. Those needing rest should buckle up and rest in the back.
5. Schedule a break every 2 hours or 100 miles. Sooner if need be. You can always ask a travel counselor indicate appropriate stopping points along your journey.

Know the warning signs of being drowsy.

1. Your eyes close or go out of focus on their own.
2. You have trouble keeping your head up.
3. Continuous yawning
4. Thoughts that wander and/or are disconnected
5. You don't remember driving the last few miles.
6. You begin drifting, tailgating, or miss traffic signs.
7. You jerk the car back into the lane.
8. You drifted off the road and possibly just missed having an accident.

If you show any of these signs pull off the road and take a nap, you're in danger of falling asleep., and always remember don't drink and drive have a designated driver. Be a responsible host. Remember "NONE FOR THE ROAD".

Tommy O'Collins
1/2 cup club soda
1-1/2 tablespoon lime juice
1 teaspoon rum extract
1 to 2 packets sweetener
1 to 2 ice cubes
Combine ingredients in blender.
Blend on high for 10 seconds
Pour over ice into tall glass.

NMCP proves ready for terrorist attack

Story and Photos by JO2 Duke Richardson

Terrorists attacked government buildings in Portsmouth on December 6th. No one was injured. This wasn't due to botched planning, but was merely a simulation designed to see how well Naval Medical Center Portsmouth could handle such an emergency.

The day itself began as a typical Thursday morning. People were coming to the base fresh from their morning commutes expecting just another day at the office. However that all changed at 7:30 a.m. when three Coast Guardsmen staggered to the main gate tired, worn and noticeably disheveled, frantically pleading for help. Coughing, wheezing, and gasping for fresh air, they explained they had come from the Federal Building in downtown Portsmouth which had just been hit by a chemical attack, allegedly perpetrated by terrorists.

Once base security managed to get the scoop, they did their best to console and comfort the victims while they awaited medical assistance as more and more people from the Federal Building made their way to the gate crying for help.

This was no longer just another day at the office as emergency medical teams, decontamination crews, and NMCP's core medical staff were called into action to put their training and skills to work in this reality-based simulation.

Once the initial medical teams made their way to the gate, fully decked out in chemical protective suits, they made quick observations of the victims, the situation at large, and began difficult task of getting the victims to the emergency room parking lot, which was cordoned off by yellow tape to help contain the medical and decontamination crews and the afflicted. Some of the vic-

tims made it to the treatment area on their own volition, others were transported in a van which was commandeered by security, and the rest helped each other through sheer willpower and a never say die attitude.



Naval Medical Center Portsmouth held a very realistic antiterrorism drill December 7th. During the drill, staff members had to respond to simulated attacks on the Federal Building in downtown Portsmouth and the Naval School of Health Sciences on the NMCP compound by administering aid to hundreds of "victims."

Outfitted with fire hoses and a portable shower, the decontamination team worked feverishly in rinsing the contaminants off of the victims. Once that was done, the wounded were each taken inside the hospital to the emergency room for further evaluation.

Just as it appeared things were going to return to some

drive and provide medical assistance to their fallen and injured comrades.

Not only was NMCP's main medical personnel called into action, but a number of staff members from throughout the hospital were called in to help stretch in the wounded and the "dead."

Once through the triage process, each of the explosion victims were evaluated by medical professionals and given the treatment and care they needed.

Years, even a few months ago, a scene like this would normally be linked to any number of movies from Hollywood or in a lesser-developed nation. But after the events of September 11th, that attitude within this nation has changed forever. It is also because of those events that Naval Medical Center Portsmouth opted to conduct such a drill, and in typical fashion, the staff members showed why NMCP is the "First and Finest," according to Capt. Michael Krentz, MC, NMCP's Exercise Coordinator and Associate Director for Fleet and Family Medicine. "The (men and women of NMCP) did extremely well today. I'd be very proud to serve in a war with any of them," he said. "Things today went flawless and they proved they're ready and able to handle any (serious) situation."



Medical personnel decontaminate themselves in portable "showers"

sense of normalcy, a crazed suicide bomber strapped with grenades and C-4 explosives attacked the Naval School of Health Sciences. After the explosion at the school, it was time for NMCP's medical staff to kick into over-

Navy Advancement Exam Writer Visits NMCP

Story and Photos by JO2 Duke Richardson

Naval Medical Center Portsmouth staff members recently had a very special visit from someone that plays a major part in their advancement. HMCM(SW) Steve Kilroy, the exam writer for the Navy's Hospital Corpsman advancement exam.

Kilroy didn't exactly give the staff members the answers for the upcoming exams, but he did give them a wealth of insightful information designed to help them better understand the advancement process. He also gave some helpful tips and advice to help give them a little bit of an edge when the new changes to the exams take effect this year, and some tidbits on more changes to the examination process in the coming years.

One such change he talked about is the number of questions on the exam. The number of questions on the exam has been bumped up from 150 to 200. According to Kilroy, this is being done in order to test not only your rate knowledge, but also your military knowledge. "The reason for this is the Master Chief Petty Officer of the Navy and Chief of Naval Operations want to promote the best Sailor, not necessarily the person that didn't study the most," said Kilroy. "They want to promote the Sailor that comes to work everyday, knows his job, knows his service, and shows full dedication (to the Navy's mission). That's not saying that someone won't make it because they don't (have a warfare pin) or anything like that. For example, one person may get promoted because he knows how to open ranks better or have a better knowledge of grooming standards, and another person may get promoted because they have more (in-rate) knowledge. That's going to be the tough part of the new exam because these questions are evenly weighted. Being the best corpsman might not get you advanced the next time around. So it's a good idea to take time and also study the Basic Military Requirements."

Kilroy also said the best way to begin the studying process is by looking at the bibliography for your particular rating. "The bibliography (BIBs) tell you exactly where the test questions are coming from," he said. "When I put together the exam, I make questions from sources that are readily available to people taking the test, such as the Manual for Medical Department. Everyone should be able to get a copy of that. You cannot make

questions from sources that are higher level, or are not as easily accessible. With a little bit of initiative, it should not be a problem locating the resources needed to properly prepare for the test. That's why most of the questions on the test come from the training manuals."

"Our test questions are based on the Navy Occupational Standard," Kilroy continued. "Every couple of years we go and find out (what each hospital corpsman rate) does...and try to focus on what their job is and, we make questions based on that information. We make the right questions for the right rate level for the corpsmen. The questions must be based on what's currently being done in the fleet and will make the test taker think and become better corpsmen."

In the future, potential advancees will have a new way of taking the exam, says Kilroy. "Within the next two years, at least 50 percent of the ratings will be taking the advancement exam on computers," he said. "The reason it takes so long for you to get the test results back is because we have to wait for (all commands Navy-wide) to get their exams and test questions turned in. Some commands take months to get their exams turned in. (In the past one ship) never got their exams turned in (due to extreme circumstances).

"That's why when we move to comput-

erized exams, everyone will take the exam at the same time and the exams will get graded much quicker. (With this technique) you will find out within two to three days whether or not you got advanced. That's an incentive right there to stay in the Navy because right now (the long wait) is something a lot of people don't like. But that's changing."

Proper and early exam preparation is the key to scoring good on the advancement exam, says Kilroy. By checking the BIBs and getting the resource manuals needed, and enhancing all aspects of your military and professional knowledge, the new changes to the exam process should not cause the test takers any undue stress. "You can not be a hospital corpsman and not a Sailor, the MCPON and CNO have come up with this plan that has changed the game plan," said Kilroy. "Performance is now more important whereas previously, PNA points were. Also, the old thing of 'I've been in the Navy for (x-amount) of years' no longer plays a factor. That's all gone away and is no longer a factor. So the most important thing you can do now is keep your evals up and start studying early."



Hospital Corpsman Advancement Exam Writer HMCM (SW) Steve Kilroy recently visited Naval Medical Center Portsmouth. He gave the NMCP staff members a wealth of information they can use to prepare for the exam, as well as a peek at more changes to the exam coming in the future.

Pound for pound the strongest Corpsman

Story and Photos by JO3 Theresa Raymond



HM2 Patrick Jones recently lifted 300 pounds making him the strongest pound for pound during a recent competition at the Norfolk Naval Shipyard.

HM2 Patrick Jones bench-pressed 300 pounds recently during a weight lifting contest at the Norfolk Naval Shipyard. While 300 pounds may not tip the scales for the power lifters that grace the covers of muscle magazines, Patrick weighs only 149 pounds making his winning lift over twice his body weight.

"My wife told me about the contest just two weeks before the event. I knew, if I wanted to win, I would have to train extra hard," recalls Jones.

Working out every day was something Jones felt he had to do in order to be number one. "I went to the shipyard everyday for the entire two weeks. I wanted to get a feel for their weight system."

Coming in at 149 pounds, the heaviest in his class, Jones felt his weight was a small disadvantage. "The contest was judged using the Schwartz formula. That made me feel as if coming in heavier might make me lose the whole thing." The Schwartz formula scores by how much more weight a person lifts over his own body weight.

The competition, which consisted of 30 contestants, six of which were in Jones' weight class, had three lifts that were scored. "I was nervous about my lifts because the other guys looked so much bigger than me, but I kept saying to myself, 'size isn't important, power and technique play a bigger role.'"

With lifts ranging from 250 pounds to

300 pounds, Jones proved to reign supreme in his 140-154 pound class and proved hard work does pay off. "I felt working out at the shipyard, using their weights, gave me the edge I needed since not every weight set is alike."

Recalling the last lift, Jones says he really didn't think he had much support from his peers to do the 300-pound lift. "Everyone thought I was too small to lift 300 pounds. I felt confident even though I had only made the lift the day before."

"After I did the lift, I realized I can lift 300 pounds, and the night before wasn't a one time thing. After that my wife and I knew I had won."

The competition also consisted of a pound-for-pound contest in which Jones placed second. "The Schwartz formula helped to determine if I'd placed first or second. I just knew I had placed first because I lifted twice my body weight, but the guy who won was really powerful," recalls Jones. "I would have liked to have both trophies though," laughs

Jones.

Placing first earlier this year during fitness month at a bench press competition here at Naval Medical Center Portsmouth, Jones points out the obvious differences between the two contests. "The contest here was different from the shipyard's. Here, they wanted to see how many times you could bench your body weight. I pressed my body weight 28 times during that competition."

Jones has won numerous competitions and competed in many events from Rota, Spain to Portsmouth, Va since he started lifting over four years ago.

Capt. Menon Retires After 26 years, ceremony scheduled for 18 January

Announcing the retirement ceremony for CAPT Padman A. Menon, MC, USN on 18 Jan 02 at 1030 in the main auditorium, Bldg. 215. CAPT Menon will be completing over 26 years of distinguished active duty service as a board certified Pediatrician and Dermatologist and currently as the sole Mohs micrographic surgeon in the Department of Dermatology treating invasive skin cancer's. Capt Menon additionally, was the Department Head of Dermatology for Fleet Hospital 5 during Operation Desert Shield/Storm and on the maiden voyage of the USNS Comfort. Please come and join Captain Menon, his family, colleagues and friends in wishing him a traditional Navy Fair Winds and Following Seas. Reception to immediately following the ceremony at the former Galley, Bldg. 215.

Patient safety stressed during National Nurse Anesthetists Week

As healthcare heads into a new era, surgical and obstetrical patients can rest assured that anesthesia has never been safer. In fact, according to a 1999 report from the Institute of Medicine, anesthesia care today is nearly 50 times safer than it was 20 years ago. Navy and other military Certified Registered Nurse Anesthetists (CRNAs) will join CRNAs from around the country in celebrating a history of exceptional patient care and anesthesia safety during National Nurse Anesthesia Week, Jan. 20-26, 2002.

"Nurse anesthetists have been providing high-quality anesthesia care for more than 100 years," says Cmdr. Karin Lundgren, Senior Nurse Anesthetist at Naval Medical Center, Portsmouth. "Patient safety is, and always has been, the number one priority for nurse anesthetists. We administer to the patient's physical and emotional needs, offer reassurance and comfort, and stay right by the patient's side throughout the surgery. These are the hallmarks of a CRNA."

Supporting Cmdr. Lundgren's statements are data. Studies have shown a dramatic reduction in anesthesia mortality rates during the last 20 years to the present low of one death for every 240,000 anesthetics. Thanks to improved technology and pharmaceuticals, and increased education for nurse anesthetists and physician anesthesiologists, anesthesia safety is at an all-time high.

CRNAs practice in every setting in which anesthesia is delivered: traditional hospital surgical suites and obstetrical delivery rooms, critical access hospitals, ambulatory surgical centers; the offices of dentists, podiatrists, ophthalmologists, and plastic surgeons, and U.S. Military, Public Health Services and Veterans Administration healthcare facilities. In the United States Military, CRNAs are all over the world, on land and at sea. You can find a CRNA in Italy, Japan, Iceland, Cuba, and Guam, on the USS Kearsarge or on the ground with the Marines. As we like to say, "THE WORLD IS OUR Operating Room."

"There are more than 26 million anesthetics given in the United States each year," states Cmdr. Lundgren, "and CRNAs administer over half of them. We are proud of where we came from and where we are going. I can only envision that the quality of anesthesia care will continue to improve in the next century. I know CRNAs will be a big part of that future."

Charlie Papa – Steaming to assist.

Hearts are still changing



By Cmdr. Bruce Anderson, CHC, USN

From the beginning of the observance of the Dr. Martin Luther King, Jr. holiday, some have held that it's just another ethnic observance, primarily for African-Americans. I couldn't disagree more. I believe that Martin Luther King, Jr. Day stands alongside such national holidays as Independence Day in offering a deep look into the very soul of what America represents – freedom and justice for all its citizens.

Dr. King's genius rested, not so much on the proclamation of a new message, but in his ability to restate the vision of liberty and equality expressed so profoundly in our nation's constitution. Perhaps his greatness ultimately can be measured not only by what he was able to accomplish for African-Americans, but by the transformation of hearts and minds he elicited in the hearts of all Americans, regardless of culture or ethnic origin. By challenging a nation to live up to its highest ideals, he held up a mirror and dared its citizens

to take a good hard look at the existing segregation laws and injustices of the day. And, one by one, many millions of people who didn't like what they saw, determined to look at themselves and others differently – many taking up the challenge to do something about it, marching, protesting, and some even giving their lives in the struggle for justice. Dr. King helped changed laws that needed changing. He also did something far more rare – he changed people's hearts. We celebrate this national holiday in his honor because, in the spirit of true faith, hope and love, he established himself as one of America's great heroes.

There's still plenty to be done before our nation's visions and loftiest ideals are fully realized. However, it's my hope that with God's help and through this relatively new national holiday, Dr. Martin Luther King Jr.'s life will continue to serve as an example and an inspiration to us all.

Capt Winslett Retires after 29 years as Navy Nurse

Amid praise and accolades, Nurse Corps Capt. Julia C. Winslett, Nurse Corps stepped down as Associate Director for Nursing to retire after a 29-year naval career. She said goodbye to military life in ceremonies held at Naval Medical Center Portsmouth November 30.

Approximately 200 well-wishers were in attendance when Winslett bid farewell to what she describes as "the best" 29 years of her life.

Rear Admiral Nancy Lescavage, NC, Director of the Navy Nurse Corps, Bureau of Medicine and Surgery, Washington, DC, spoke on how Winslett had grown in the Navy from when they were junior Officers. During her ceremonial remarks, the admiral showered Winslett with praise. "I know of few who deserve such accolades as this superb Naval Officer," Lescavage said. "The crew here (at NMCP) have never had it so good."

Winslett joined the Navy in 1972 when she received her commission. She has since served worldwide with duty stations ranging from the Naval Regional Medical Center in San Diego to the U.S. Hospital in Okinawa, Japan.

The captain plans to return to Georgia when her husband, Mr. Lee Winslett, Jr., retires in February 2002.

Health Care Benefits For Guard and Reserve

By TRICARE Management Activity (TMA) Communication & Customer Service Office

Members of the Reserves and National Guard who are called to active duty under Executive Order 13223, in response to the Sept. 11, 2001, terrorist attacks are eligible for the same health care and dental benefits under TRICARE as other active duty service members. Moreover, for their eligible family members, TRICARE is offering newly enhanced health benefits under the TRICARE Reserve Family Demonstration Project. The demonstration supports continuity of health care for Reserve and Guard family members. The demonstration applies to all covered health care services provided on or after Sept. 14, 2001, and before Nov. 1, 2003.

The demonstration project does not change eligibility requirements for health benefits — family member eligibility begins on the effective date of the orders to active duty, provided the orders are for more than 30 days. Health care will be provided by uniformed services military treatment facilities, and by authorized civilian health care providers. New under the demonstration are the waiver of deductibles; authority for TRICARE to pay above the TRICARE allowable rates for care provided by non-participating providers; and waiver of the requirement for a non-availability statement (NAS) for inpatient care.

Families of Reserve and Guard members who are called to active duty for 179 days or more may enroll in TRICARE Prime, if they live where Prime is offered. The Prime benefit remains the same, with no enrollment fees or co-payments for medical care for active duty family members. Enrollment forms must be completed and military treatment facilities and/or TRICARE Prime network providers must be used. There are no pharmacy co-payments at military hospitals or clinics, but there are modest pharmacy co-payments associated with the use of retail pharmacies and the National Mail Order Pharmacy program.

Reserve and Guard families who have continuing relationships with providers who aren't in the TRICARE networks may find that enrolling in TRICARE Prime (and thereby having to use only providers who are part of the TRICARE Prime network) is not the best choice for them. Under these circumstances, using TRICARE Standard may be a better option.

Families of activated Reserve and Guard members become eligible for TRICARE Standard or Extra on the first day of the military sponsor's active duty, if the sponsor's orders are for a period of more than

30 consecutive days of active duty. For active duty families, TRICARE Standard pays 80 percent of the TRICARE maximum allowable charge for covered health care services that are obtained from authorized, non-network, civilian health care providers. TRICARE Extra offers discounted cost shares (15 percent of negotiated fees) when TRICARE network providers are used.

Under the demonstration, three things are improved for family members. First, the annual deductible was waived for family members who use TRICARE Standard or Extra. The deductibles were waived to avoid undue financial hardship for families who may have already paid an annual deductible under their health insurance provided by their non-military employer.

Second, family members who receive care from "participating" or "non-participating" providers pay the same amount: 20 percent of the allowable charge. Family members are not legally responsible for the balance above the TRICARE allowable charge that some non-participating providers charge. TRICARE will pay up to 15 percent above the TRICARE allowable charge for eligible Reserve Component families.

Third, the requirement to obtain non-emergency inpatient care from a military treatment facility was waived. This waiver allows continuity of health care by the families' civilian provider. Family members, however, are not prevented from using military treatment facilities and are encouraged to inquire about local military facility specialty capabilities.

Persons who are covered by other health insurance (such as a civilian employer's health plan) should be aware that TRICARE pays after those plans have made their payments for health care services. The only time TRICARE is not second payer is when Medicaid (a public assistance program) is involved, or if the patient has a health care insurance policy that is specifically designated as a TRICARE supplemental policy. In those cases, TRICARE pays before the other insurance.

TRICARE Standard users should make sure that the provider from whom they seek health care has been certified by the regional TRICARE contractor as an authorized provider of care for TRICARE patients (check with the provider, or with the regional TRICARE contractor). If they receive services from a provider who is not authorized, the cost of services — even though they might otherwise be covered by the program — will

not be shared by the government.

Activated Reserve and Guard members should update their information in the Defense Enrollment Eligibility Reporting System (DEERS) database by visiting their local military ID card issuing facility. They should bring proper documentation to update their family file, such as a marriage certificate, birth certificate or divorce decree. Incorrect information can result in delayed claims processing, problems with the use of retail pharmacies and the National Mail Order Pharmacy benefit, and other difficulties. Beneficiaries may go online to find the three closest personnel offices or ID card facilities at <http://www.dmdc.osd.mil/rsl/>. For more information about DEERS enrollment, beneficiaries may contact the Defense Manpower Data Center Support Office (DSO) Telephone Center at 1-800-538-9552.

Activated Reservists or National Guard members may get more information about their family's TRICARE Standard benefits from the TRICARE Standard Handbook. The handbooks are available at the nearest uniformed services hospital or clinic, or any TRICARE service center, or by writing to the TRICARE Management Activity, 16401 E. Centretch Parkway, Aurora, CO 80011-9043. Information is also available on the TRICARE Web site www.tricare.osd.mil, from the Reserve Affairs Web site www.defenselink.mil/ra, or by calling the worldwide TRICARE Information Center toll-free at 1-888-DoD-CARE (1-888-363-2273).

All active duty service members are provided with dental benefits at no cost through military dental treatment facilities. Reservists and National Guard members called to active duty for a period of more than 30 consecutive days who are enrolled in the TRICARE Dental Program (TDP), will have their individual coverage discontinued during their period of active duty. They are eligible for dental care in military treatment facilities. In addition, activated reservists whose family members are not currently enrolled in the TDP may enroll them for the period of time the member is on active duty. Also, TDP-enrolled family members of activated reservists will receive the same 60 percent discount off their TDP monthly premium payment as active duty family members. For more information about the TDP, call United Concordia Companies, Inc., toll free, at 1-800-866-8499, or visit the Web site www.ucci.com.

Making New Years Resolutions Work

Most new years resolutions only last statistically for one month. Health promotions, located on the 2nd deck of bldg. 215 is an excellent resource for programs designed to help you keep your new years

promises and reach your health goals. Here is a brief list of some of the programs and resources available to keep you healthy for the new year and beyond.

"This year I will lose weight."

Patients need a consult from their provider to Clinical Nutrition for weight management. NMCP Staff members may self refer. Participants attend Orientation, then register for Multi-Session Classes. Call 953-2627 or TRICARE for more information.

Weight Management, Wellness Center NavSta. Norfolk, Bldg. CEP 58, (5 wk program) Wednesdays, 12:00-1:30PM. Call to register 445-1443.

Weight Management Dam Neck Branch Medical Clinic-4 weeks, Wednesdays, 9:00-11:00AM. Call Mrs. Malson at 314-7132 for more information.

Weight Management NAB Little Creek Rockwell Hall Wellness Center (4 weeks), Call 462-1734 to register

Weight Management, NAS Oceana

Thursdays 8 week course from 8:30-10:00AM, Call 314-7084 or 314-7020 to register.

Hypnosis and Weight Management

Four (4) sessions **Starting 1st Wed of each month. Building 2 (Charette) Internal Medicine Conference Room.** Call 314-6014 for reservations

Ship Shape Program, 10 week course for Active Duty Members. Held at NSHS, Bldg. 104, Auditorium Wednesdays 1400-1600. Call 314-6014 for more information.

"This year I will stop smoking."

Naval Medical Center Portsmouth, Charette Health Care Center, 5th deck, Conference Room # 38. Tuesdays/Thursdays 10:00-11:00AM. Call Mr. West at 953-5975 to register. Naval Medical Center Portsmouth, Charette Health Care Center, Pulmonary Clinic. Thurs 1630-1800 Call Catherine C. Burke, RN, CPAN 953-2089

Addiction Medicine Cessation Classes

1st Tuesday every month from 7:30-8:30 AM (class)

1st Thursday every month 7:30-8:30 AM. (Support and sharing - optional), NMCP Psychiatry, call 953-5269 for information.

Dam Neck Branch Medical Clinic

Tuesdays 1300-1500 (4 sessions) Bldg. 543, Room 163

Call Maggie Malson 314-7132 for more information.

NAVSTA Norfolk Wellness Center

Thursdays 9:00-10:30 AM, Bldg. CEP-58 Call 445-1443 to register (4 sessions). Make-up classes held on the following Monday 8:00-9:30 for every session.

NNSY Branch Medical Clinic

Fridays, 10:00-11:00 AM. Call 314-6930 to register.

Oceana Branch Medical Clinic,

Tuesdays 7:30-9:00am or Wednesday 1430-1600, Bldg. 529. Call 314-7084 for more information

BMC Yorktown—Call 314-6109 for time and dates.

NAB Little Creek Rockwell Hall Wellness Center

Call 462-1734 to register (4 sessions)

Tobacco Cessation & Hypnosis

Next class begins Nov. 19th. (4 sessions)

Call 314-6014 or 953-5097 for more information.

Tobacco Cessation Facilitator Course

Teaches the American Cancer Society "Fresh Start" Program. CEU's available.

Reserve Support Group - CEP 86 (Auditorium), Thursday 04 Oct 01 0730-1600. Call 314-6014 to register

"This year I will stop drinking."

Alcohol Aware - 2 hr prevention course

NMCP, Bldg. 107, Rm. 220, Call DAPA at

953-6076 or 7434 to register

Prevent 2001 (3 day course) NMCP, Bldg. 107,

2nd deck, Rm. 220. For registration and information, call 953-6076/7437/5332

"This year I will get in shape."

Navy Exercise Leader Course

(2 ½ days) Instruction by NAVSTA Norfolk Recreation Department for Fitness Coordinators on BUPERS PRT policies and procedures. Contact Fitness Coordinator at 445-4739 or 444-0399, fax 444-9053 for exact date.

MWR Naval Station Norfolk

Indoor Exercise Program Tues. & Thurs. 12:30-1:30 PM, Bldg. CEP-58. For dates & information call 445-4739/444-0399.

MWR Naval Medical Center Portsmouth

Fitness Room-NMCP

New Athletic facility now open in old galley area of Bldg. 215. For Active Duty and Civilian staff members only. Civilians must pay \$15.00/month at MWR Travel Office, Bldg. 215, 2nd deck. Contact Shay Arlen at 953-4580 for further information.

Fitness Assessments or Personal Training for NMCP staff & beneficiaries, call Susan Lowry, 953-5094/5. Bldg. 276 (Gym)

Aerobic Fitness at the Pool -Bldg. 252 (Pool). Water aerobics & water walking classes. Lap Swim M-F 6:00-8:00 AM, 10:00-1:00 PM, 4:30-5:45 PM. Family Swim M-F 1:00-4:30 PM and 5:45-7:00 PM, Call 953-5946.

Stride for Health... Every Step Counts

New walking club at NMCP. Meets 1st Monday of each month in Bldg. 215 Auditorium Section B; 1200-1300

For further information please contact 953-5097 or 314-6014.

MWR Dam Neck

"Loosen Up" (Flexibility Class **4:30 to 5 PM**, Tuesday and Thursday Call 492-7483 to register

"Exercise While Away" (interval training on how to exercise with limited space and equipment.

Wednesdays, 4:30-5:30 PM

NAB Little Creek Rockwell Hall Wellness Center

Fitness Assessment, Personal Training, or Circuit Training, Call Paul Knapp, 462-1734.

Urban Orienteering Team building, scavenger hunt, and running all in one. Call 462-1734 to register.

Fitness Lecture Series 3 – 1 hour sessions covering Cardiovascular Fitness, Strength Training, and Flexibility. Call 462-1734 for information.

Health Promotion Offices

Robin Hood Rd., Suite 220	314-6014
Bldg. 215, Rm. 2-140	953-5097
NavSta. Norfolk Wellness Center	445-1443
NAB Rockwell Hall Wellness Center	462-1734
Northwest Branch Clinic	421-8272
Oceana Branch Clinic	314-7084/7086
Dam Neck Branch Clinic	314-7132
NNSY Branch Clinic	314-6952
Yorktown Branch Clinic	314-6124